

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants

Joseph Daniel Leachman

Title

A MOUNTING CLIP FOR REMOVABLE PROTECTIVE

**SHIELDS** 

Docket No.

705397.4009

Customer No. :

34313

Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

## **UTILITY PATENT APPLICATION TRANSMITTAL**

1.		Application w application is for a(n) Original (non provisional) Design Plant							
2.		Applicant claims small entity status. See 37 CFR 1.27							
3.	$\boxtimes$	Specification, including Description, Claims and Abstract (Total Page: 12							
4.	$\boxtimes$	Drawing(s) (35 USC 113) (Total sheets1)							
5.	Oath or a. b.	Declaration  Newly executed (original or copy)  Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed)  Deletion of Inventors (Signed statement attached deleting inventors(s) named in the prior application.) See 37 CFR 1.63(d)(2) and 133 (b).							
6.		CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)							
CERTIFICATE OF MAILING 37 CFR §1.10									
	ptember 10 Mailing Lab	5, 2003 el No.: EV 342473115 US							
deposited with suffic	with the U	on the dated listed above, this paper (along with any paper referred to as being attached or enclosed) is being United States Postal Service in accordance with 37 C.F.R. § 1.10 as "Express Mail Post Office to Addressee," age in an envelope addressed to: Mail Stop Patent Application, Commissioner of Patents, P.O. Box 1450, 13-1450.							

		•									
7.	a. b.	Nucleotide and/or Amino Acid Sequence Submission (if application, all necessary)  Computer Readable Form (CRF)  Specification Sequence Listing on:  CD-ROM or CD-R (2 copies); or  Paper  Statement verifying identity of above copies									
8.		An assignment of the invention toMitsubishi Digital Electronics America, Inc.  is attached. A separate ☐ "COVERSHEET FOR ASSIGNMENT (DOCUMENT) ACCOMPANYING NEW PATENT APPLICATION" or ☒ FORM PTO 1595 is also attached.  will follow.									
9.	$\boxtimes$	37 CFR 3.73(b) Statement (when there is an assignee) (Power of Attorney by Assignee)									
10.		English Translation Document (if applicable)									
11.		Information Disclosure Statement/PTO 1449 (or PTO/SB/08a) Copies of citations									
12.		Preliminary Amendment									
13.	$\boxtimes$	Return Receipt Postcard (MPEP 503) (Should be specifically itemized)									
14.		Certified Copy of Priority Document(s) (if foreign priority is claims)									
15.		Non-publication Request under 35 USC 122 (b)(2)(B)(i) (Applicant must attach form PTO/SB/35 or its equivalent)									
16		Other ·									
17. below a		NTINUING APPLICATION, check appropriate box, and supply the requisite information preliminary amendment or in an Application Data Sheet under 37 CFR 1.76:									
applicat	tion no.	Continuation Divisional Continuation-in-part (CIP) of prior									
	Prior ap Examin	oplication information: er: Group Art Unit:									
	For CO	NTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior									

Joseph Daniel Leachman

705397.4009

Applicant

Docket No.

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. This incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.

Applicant Docket No.

Joseph Daniel Leachman 705397.4009

A 1571			ENT:							_	
A. The Commissioner is hereby authorized to charge indicated fees and credit any											
overpayments to Deposit Account No. <u>15-0665</u> .											
<u> </u>	Check	Credi	Card			Money Order				Other	
BASIC FILING FEE:											50.00
Total Claims		27	-	20	=	7	х	\$18.00	)	12	26.00
Independent (	3	-	3	=		х	\$84.00	)		0.00	
Multiple Depe	ndent Claims	\$280	(if a	pplica	able)					\$	0.00
TOTAL OF ABOVE CALCULATIONS											76.00
Reduction by ½ for Filing by Small Entity. Note 37 CFR §§ 1.9, 1.27, 1.28.											0.00
Assignment \$40 (if applicable)											10.00
TOTAL FEES SUBMITTED										\$91	16.00
	e Address		withou 	ıt fee	or De	clarat	ion u	ınder 37	'CFR§	1.53.	
Respectfully submitted,											
September 16,	2003	<u>.</u> Kei	nneth	<b>M</b> S. Ro	ute oberts	4	Pa	terl	<u>~</u>		
	Total Claims Independent C Multiple Depe TOTAL OF Al Reduction by Assignment C.  Correspondence Custom	Charge any addition Account No. 15-06 B. Payment Enclosed Check BASIC FILING FE  Total Claims Independent Claims Multiple Dependent Claims  TOTAL OF ABOVE CALCULATIO Reduction by ½ for Filing by Small Assignment \$40 (if applicable) TOTAL FEES SUE  C. This application is b  Correspondence Address	Charge any additional fee requested Account No. 15-0665.  B. Payment Enclosed Check Credit Check Check Credit Check C	Charge any additional fee required Account No. 15-0665.  B. Payment Enclosed Credit Card  Check Credit Card  BASIC FILING FEE:  Total Claims 27 -  Independent Claims 3 -  Multiple Dependent Claims \$280 (if a TOTAL OF ABOVE CALCULATIONS  Reduction by ½ for Filing by Small Entity. Note 37  Assignment \$40 (if applicable)  TOTAL FEES SUBMITTED  C. This application is being filed without Correspondence Address  Customer Number. 34313  Reserved	Charge any additional fee required under Account No15-0665  B. Payment Enclosed	Charge any additional fee required under 37 CAccount No. 15-0665.  B. Payment Enclosed Credit Card BASIC FILING FEE:  Total Claims 27 - 20 = Independent Claims 3 - 3 = Multiple Dependent Claims \$280 (if applicable)  TOTAL OF ABOVE CALCULATIONS  Reduction by ½ for Filing by Small Entity. Note 37 CFR §§ 1.  Assignment \$40 (if applicable)  TOTAL FEES SUBMITTED  C. This application is being filed without fee or Decorrespondence Address  Customer Number. 34313  Respectfully September 16, 2003	Charge any additional fee required under 37 CFR 1.  Account No. 15-0665.  B. Payment Enclosed Check Credit Card Mode  BASIC FILING FEE:  Total Claims 27 - 20 = 7  Independent Claims 3 - 3 =  Multiple Dependent Claims \$280 (if applicable)  TOTAL OF ABOVE CALCULATIONS  Reduction by ½ for Filing by Small Entity. Note 37 CFR §§ 1.9, 1.2:  Assignment \$40 (if applicable)  TOTAL FEES SUBMITTED  C. This application is being filed without fee or Declarate Correspondence Address Customer Number. 34313  Respectfully submit	Charge any additional fee required under 37 CFR 1.16 at Account No. 15-0665.  B. Payment Enclosed	Charge any additional fee required under 37 CFR 1.16 and 1.17 Account No. 15-0665.  B. Payment Enclosed Check Credit Card Money Order  BASIC FILING FEE:  Total Claims 27 - 20 = 7 x \$18.00  Independent Claims 3 - 3 = x \$84.00  Multiple Dependent Claims \$280 (if applicable)  TOTAL OF ABOVE CALCULATIONS  Reduction by ½ for Filing by Small Entity. Note 37 CFR §§ 1.9, 1.27, 1.28.  Assignment \$40 (if applicable)  TOTAL FEES SUBMITTED  C. This application is being filed without fee or Declaration under 37 Correspondence Address Customer Number. 34313  Respectfully submitted,	Charge any additional fee required under 37 CFR 1.16 and 1.17 to Dept Account No. 15-0665.  B. Payment Enclosed	Charge any additional fee required under 37 CFR 1.16 and 1.17 to Deposit Account No15-0665 .  B.

ORRICK, HERRINGTON & SUTCLIFFE LLP 4 Park Plaza, Suite 1600 Irvine, CA 92614-2558 Telephone: (949) 567-6700 Facsimile: (949) 567-6710